

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MG		2/1/99
O.I.P.E. CLASSIFIER			2/9
FORMALITY REVIEW	30	96989	7-16

INDEX OF CLAIMS

✓ Rejected N Non-elected
 Allowed I Interference
 (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
1	5/10/93
2	5/10/93
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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